

## Fill in this information to identify your case:

Debtor 1	<u>Jerrel</u> First Name	<u>Lloyd</u> Middle Name	<u>Kenemore</u> Last Name
Debtor 2 (Spouse, if filing)	<u>Jade</u> First Name	<u>Ashley</u> Middle Name	<u>Kenemore</u> Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)	<u>18-41363-13</u>		

Check if this is an amended filing

Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim	Priority amount	Nonpriority amount
<u>\$1,780.00</u>	<u>\$1,780.00</u>	<u>\$0.00</u>

2.1 Julian, Crowder & Shuster, P.C.

Priority Creditor's Name

860 Hebron Parkway

Number Street

Suite 501

Last 4 digits of account number

When was the debt incurred? 03/29/2018

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify Attorney fees for this case

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.**

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

**Total claim**

4.1	<b>Affiliated Pathologists, PA</b> Nonpriority Creditor's Name <b>520 E. 22nd St</b> Number Street	<b>\$40.00</b>
<p><b>Last 4 digits of account number</b> <u>7 7 4 1</u></p> <p><b>When was the debt incurred?</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <b>Medical Charges</b></p>		
<p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>		
<p>4.2</p> <p><b>Air Evac Lifeteam</b> Nonpriority Creditor's Name <b>PO Box 106</b> Number Street</p>		<b>\$52,488.09</b>
<p><b>Last 4 digits of account number</b> <u>7 2 2 A</u></p> <p><b>When was the debt incurred?</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <b>Medical Charges</b></p>		
<p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>		

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.3****\$0.00****American Medical Collection Agency**

Nonpriority Creditor's Name

**4 Westchester Plaza**

Number Street

**Suite 110****Elmsford** **NY** **10523**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number                            When was the debt incurred?                     

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**4.4****\$117.25****American Medical Collection Agency**

Nonpriority Creditor's Name

**4 Westchester Plaza**

Number Street

**Suite 110****Elmsford** **NY** **10523**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number 3 1 3 2When was the debt incurred?                     

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Collecting for - Clinical Pathology Labs**

**4.5****\$490.00****Chase Card Services**

Nonpriority Creditor's Name

**Correspondence Dept**

Number Street

**PO Box 15298****Wilmington** **DE** **19850**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number 6 5 7 3When was the debt incurred? 02/2007

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Credit Card**

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.6****\$79.00****Clinical Pathology Laboratories Inc**

Nonpriority Creditor's Name

**PO Box 141669**

Number Street

Last 4 digits of account number 8 1 0 1

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Austin TX 78714-1669**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**4.7****\$297.55****CMRE Financial Services, Inc.**

Nonpriority Creditor's Name

**3075 E. Imperial Highway**

Number Street

**Suite 200**Last 4 digits of account number 9 7 5 8

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Brea CA 92821-6753**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Collecting for - Texas Radiology Associates**

**4.8****\$2,678.00****Convergent Outsourcing, Inc.**

Nonpriority Creditor's Name

**PO Box 9004**

Number Street

Last 4 digits of account number 4 4 9 5When was the debt incurred? 09/2016

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Renton WA 98057**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Collection Attorney**

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.9	<b>Denton Regional Medical Center</b> Nonpriority Creditor's Name <b>PO Box 740782</b> Number Street  <b>Cincinnati OH 45274-0782</b> City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> <b>Check if this claim is for a community debt</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$716.80</b>
<p><b>Last 4 digits of account number</b> <u>1 6 0 1</u></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <b>Medical Charges</b></p>		
<p>4.10</p> <p><b>Discover Financial</b> Nonpriority Creditor's Name <b>PO Box 3025</b> Number Street  <b>New Albany OH 43054</b> City State ZIP Code <b>Who incurred the debt?</b> Check one.  <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input checked="" type="checkbox"/> <b>Check if this claim is for a community debt</b>   <b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes       </p>		<b>\$12,991.00</b>
<p><b>Last 4 digits of account number</b> <u>8 9 4 0</u></p> <p><b>When was the debt incurred?</b> <u>07/1992</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p>		
<p>4.11</p> <p><b>ERC/Enhanced Recovery Corp</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> Number Street <b>8014 Bayberry Rd</b>  <b>Jacksonville FL 32256</b> City State ZIP Code <b>Who incurred the debt?</b> Check one.  <input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input checked="" type="checkbox"/> <b>Check if this claim is for a community debt</b>   <b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes       </p>		<b>\$731.00</b>
<p><b>Last 4 digits of account number</b> <u>2 5 5 0</u></p> <p><b>When was the debt incurred?</b> <u>07/2016</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <b>Collection Attorney</b></p>		

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.12****\$300.00****Financial Control Services**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 21626****Waco TX 76702**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number 2 0 8 7When was the debt incurred? 10/2013

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Collection Attorney**

**4.13****\$817.00****First Investors Financial Services**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**380 Interstate North Parkway, Suite 300****Atlanta GA 30399**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number 0 0 0 1When was the debt incurred? 03/01/2007

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Automobile**

**4.14****\$1,047.00****IC System Inc**

Nonpriority Creditor's Name

**444 Highway 96 East**

Number Street

**P.O. Box 64378****St. Paul MN 55164**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number 3 1 6 6When was the debt incurred? 07/2016

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Collection Attorney**

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.15****\$1,632.00****Jefferson Capital Systems, LLC**

Nonpriority Creditor's Name

**PO Box 7999**

Number Street

Last 4 digits of account number 7 0 0 3When was the debt incurred? 05/2013

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Saint Cloud MN 56302**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Factoring Company Account**

**4.16****\$513.00****Kohls/Capital One**

Nonpriority Creditor's Name

**Kohls Credit**

Number Street

**PO Box 3120**Last 4 digits of account number 1 6 0 2When was the debt incurred? 07/2008

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Milwaukee WI 53201**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Charge Account**

**4.17****\$549.00****LabCorp**

Nonpriority Creditor's Name

**PO Box 2240**

Number Street

Last 4 digits of account number 0 0 2 7

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Burlington NC 27216-2240**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.18****\$70.40****MD Pathology**

Nonpriority Creditor's Name

**PO Box 671002**

Number Street

Last 4 digits of account number 0 0 3 2

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

City **Dallas** State **TX** ZIP Code **75267-1002**

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**4.19****\$248.00****Medical Imaging of Dallas**

Nonpriority Creditor's Name

**PO Box 814129**

Number Street

Last 4 digits of account number 3 3 1 7

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

City **Dallas** State **TX** ZIP Code **75381-4129**

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**4.20****\$35.00****Nighthrays PA**

Nonpriority Creditor's Name

**PO Box 371863**

Number Street

Last 4 digits of account number 0 4 0 2

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

City **Pittsburgh** State **PA** ZIP Code **15250-7863**

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.21****\$397.00**

**Nighthrays PA**  
 Nonpriority Creditor's Name  
**PO Box 371863**  
 Number Street

Last 4 digits of account number 9 8 0 0

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Pittsburgh PA 15250-7863**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**4.22****\$590.00**

**Nighthrays PA**  
 Nonpriority Creditor's Name  
**PO Box 371863**  
 Number Street

Last 4 digits of account number 0 0 4 8

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Pittsburgh PA 15250-7863**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**4.23****\$79.00**

**Nighthrays PA**  
 Nonpriority Creditor's Name  
**PO Box 371863**  
 Number Street

Last 4 digits of account number 0 4 0 2

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Pittsburgh PA 15250-7863**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.24****\$44.00**

**Nighthrays PA**  
 Nonpriority Creditor's Name  
**PO Box 371863**  
 Number Street

Last 4 digits of account number 0 4 0 2

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Pittsburgh PA 15250-7863**  
 City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**4.25****\$61,762.00**

**Paragon Revenue Group**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy**  
 Number Street  
**216 Le Phillip Ct NE**

Last 4 digits of account number 5 9 6 9When was the debt incurred? 12/2017

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Concord NC 28025**  
 City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Collection Attorney**

**4.26****\$102.00**

**Paragon Revenue Group**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy**  
 Number Street  
**216 Le Phillip Ct NE**

Last 4 digits of account number 5 7 9 9When was the debt incurred? 09/2017

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Concord NC 28025**  
 City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Collection Attorney**

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.27****\$62.00****Paragon Revenue Group**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**216 Le Phillip Ct NE**Last 4 digits of account number 1 7 4 2When was the debt incurred? 10/2017

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

City **Concord** State **NC** ZIP Code **28025**

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Collection Attorney**

**4.28****\$2,202.73****Parkland Health and Hospital System**

Nonpriority Creditor's Name

**5200 Harry Hines Blvd**

Number Street

Last 4 digits of account number 1 2 8 5

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

City **Dallas** State **TX** ZIP Code **75235**

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**4.29****\$344.00****PathAdvantage Assosciated**

Nonpriority Creditor's Name

**PO Box 224138**

Number Street

Last 4 digits of account number 5 9 8 3

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

City **Dallas** State **TX** ZIP Code **75222-4138**

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.30****\$300.00****PMAB, LLC**

Nonpriority Creditor's Name

**PO Box 12150**

Number Street

Last 4 digits of account number 1 4 4 8When was the debt incurred? 06/2017

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Charlotte NC 28220**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Collection Attorney**

**4.31****\$540.00****Portfolio Recovery**

Nonpriority Creditor's Name

**PO Box 41067**

Number Street

Last 4 digits of account number 1 3 8 1When was the debt incurred? 05/19/2015

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Norfolk VA 23541**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Factoring Company Account**

**4.32****\$345.00****Portfolio Recovery**

Nonpriority Creditor's Name

**PO Box 41067**

Number Street

Last 4 digits of account number 8 7 9 5When was the debt incurred? 02/2013

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Norfolk VA 23541**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Factoring Company Account**

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.33****\$447.05****Professional Finance Company**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 1686****Greeley CO 80632-1686**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number 7 9 0 9**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Collecting for - Touchstone Flower Mound**

**4.34****\$307.00****Professional Finance Company, Inc.**

Nonpriority Creditor's Name

**Attn: Bankruptcy**

Number Street

**PO Box 1686****Greeley CO 80632**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number 5 0 6 1**When was the debt incurred?** 02/2015**As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Collection Attorney**

**4.35****\$308.36****Questcare Medical Services PA**

Nonpriority Creditor's Name

**PO Box 201611**

Number Street

**Dallas TX 75320-1611**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number 7 7 4 1**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Medical Charges**

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.36****\$889.88****Southwest Laboratory**

Nonpriority Creditor's Name

**625 Dallas Drive**

Number Street

**Suite 400****Denton TX 76205-7289**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number 8 4 0 7

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**4.37****\$314.00****Target**

Nonpriority Creditor's Name

**Target Card Services**

Number Street

**Mail Stop NCB-0461****Minneapolis MN 55440**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number 9 3 7 1When was the debt incurred? 07/1995

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Credit Card**

**4.38****\$10,459.96****Texas Health Presbyterian**

Nonpriority Creditor's Name

**Hospital Flower Mound**

Number Street

**PO Box 677300****Dallas TX 75267-7300**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Last 4 digits of account number 0 0 3 2

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.39****\$249.50****Timothy A. Beste MD**

Nonpriority Creditor's Name

**800 South Stemmons**

Number Street

Last 4 digits of account number 4 3 6 5

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Lewisville TX 75067-5300**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**\$888.10****Travis County Emergency Physicians**

Nonpriority Creditor's Name

**Attn: 21906K**

Number Street

**PO Box 14000**Last 4 digits of account number 6 3 8 5

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Belfast ME 04915-4033**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**\$2,262.00****UT Southwestern Medical Center**

Nonpriority Creditor's Name

**PO Box 848009**

Number Street

Last 4 digits of account number 2 8 4 0When was the debt incurred? 5/31/16

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Dallas TX 75284-8009**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.42****\$6,647.00****UT Southwestern Medical Center**

Nonpriority Creditor's Name

**PO Box 848009**

Number Street

Last 4 digits of account number 2 8 4 0When was the debt incurred? 5/31/16

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Dallas TX 75284-8009**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**4.43****\$1,050.00****Vernon Fire EMS Depa**

Nonpriority Creditor's Name

**PO Box 450**

Number Street

Last 4 digits of account number 4 8 3 5When was the debt incurred? 

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Mansfield TX 76063**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**4.44****\$890.00****Vernon Fire EMS Depa**

Nonpriority Creditor's Name

**PO Box 450**

Number Street

Last 4 digits of account number 5 0 8 7When was the debt incurred? 5/31/16

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Mansfield TX 76063**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.45****\$281.80****Western Trail Emerg Physicians**

Nonpriority Creditor's Name

**PO Box 98612**

Number Street

Last 4 digits of account number 9 1 1 9

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Las Vegas NV 89193-8612**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**4.46****\$5,570.40****Wilbarger General Hospital**

Nonpriority Creditor's Name

**920 Hillcrest Drive**

Number Street

Last 4 digits of account number 4 3 6 4

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Vernon TX 76384**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

**4.47****\$8,227.27****Wilbarger General Hospital**

Nonpriority Creditor's Name

**920 Hillcrest Drive**

Number Street

Last 4 digits of account number 4 3 6 3

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Vernon TX 76384**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

Debtor 1 **Jerrel Lloyd Kenemore**  
 Debtor 2 **Jade Ashley Kenemore**

Case number (if known) 18-41363-13**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.48****\$855.42****Wilbarger General Hospital**

Nonpriority Creditor's Name

**920 Hillcrest Drive**

Number Street

Last 4 digits of account number 4 3 6 6**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Vernon TX 76384**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical Charges**

Debtor 1 Jerrel Lloyd Kenemore  
 Debtor 2 Jade Ashley Kenemore

Case number (if known) 18-41363-13

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**Alegis Revenue Group, LLC**

Name  
25227 Grogans Mill Rd  
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**The Woodlands** TX 77380  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

**Wakefield & Associates**

Name  
Attn: Bankruptcy  
 Number Street  
PO Box 441590

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
Collection Attorney  Part 2: Creditors with Nonpriority Unsecured Claims

**Aurora** CO 80044  
 City State ZIP Code

Last 4 digits of account number 0 D X 0

Debtor 1 Jerrel Lloyd Kenemore  
 Debtor 2 Jade Ashley Kenemore

Case number (if known) 18-41363-13

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

	Total claim
<b>Total claims from Part 1</b>	
6a. Domestic support obligations	6a. <u>\$0.00</u>
6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$1,780.00</u>
6e. Total. Add lines 6a through 6d.	<u>\$1,780.00</u>

	Total claim
<b>Total claims from Part 2</b>	
6f. Student loans	6f. <u>\$0.00</u>
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$182,255.56</u>
6j. Total. Add lines 6f through 6i.	<u>\$182,255.56</u>

**Fill in this information to identify your case:**

Debtor 1	<u>Jerrel</u> First Name	<u>Lloyd</u> Middle Name	<u>Kenemore</u> Last Name
Debtor 2 (Spouse, if filing)	<u>Jade</u> First Name	<u>Ashley</u> Middle Name	<u>Kenemore</u> Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)	<u>18-41363-13</u>		

Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X** /s/ Jerrel Lloyd Kenemore  
Jerrel Lloyd Kenemore, Debtor 1

Date 07/28/2018  
MM / DD / YYYY

**X** /s/ Jade Ashley Kenemore  
Jade Ashley Kenemore, Debtor 2

Date 07/28/2018  
MM / DD / YYYY